

Best Available Copy

07/06/2009 MON 20:21 FAX 13127048137

RECEIVED
CENTRAL FAX CENTER
JUL 06 2009

0001/01

ROCKEY, DEPKE & LYONS, LLC

233 S. WACKER DRIVE, SUITE 5450
CHICAGO, ILLINOIS 60606
PH: (312) 277-2006
FAX: (312) 441-0570

FACSIMILE TRANSMISSION

TOTAL PAGES (Including Cover Page) 11 DATE: 7/6/09

Commissioner of Patents and Trademarks
TO: Examiner: Jannelle M. Lebron FROM: Robert J. Depke, Reg. No. 37,607

FAX NO: (571) 273-8300 MAIN FAX NO.: (312)441-0570
ALTERNATE FAX NO: (312)876-132

If you experience any difficulty with this transmission, please call (312) 277-2006 for assistance

ORIGINAL COPY AND ENCLOSURES

WILL BE SENT BY MAIL COURIER
 WILL NOT BE SENT

NOTES:

Inventor: Soichi Kuwahara et al.
Serial No. : 10/524,398
Art Unit: 2861
Filed: February 11, 2005
Attorney Ref.: 075834.00506

CERTIFICATION OF FACSIMILE TRANSMISSION

Robert J. Depke

IMPORTANT NOTICE

This transmission (including all attached pages) is intended only for the use of the named addressee(s), and may contain information that is privileged or exempt from disclosure under applicable law. **IF YOU ARE NOT A NAMED ADDRESSEE, YOU ARE HEREBY NOTIFIED THAT ANY USE, DISSEMINATION, DISTRIBUTION OR COPYING OF THIS TRANSMISSION IS STRICTLY PROHIBITED.** If you have received this transmission in error, please destroy all copies and notify us immediately at this telephone number: (312) 277-2006.

RECEIVED
CENTRAL FAX CENTER
JUL 06 2009

PTO/SB/21 (09-04)

Approved for use through 07/31/2006, OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

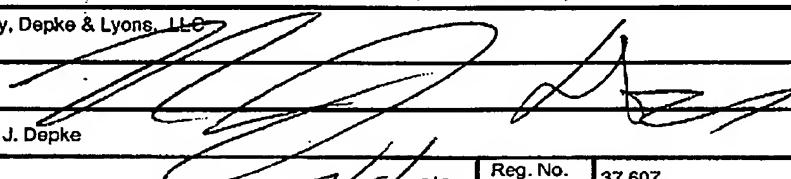
Total Number of Pages In This Submission

Application Number	10/524,398
Filing Date	Feb 11, 2005
First Named Inventor	Soichi Kuwahara et al.
Art Unit	2861
Examiner Name	Jannelle M. Lebron
Attorney Docket Number	075834.00506

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
The Commissioner is hereby authorized to charge any fees due or to credit any overpayment to Deposit Account No. 50-3891.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Rockey, Depke & Lyons, LLC	
Signature		
Printed name	Robert J. Depke	
Date	7/6/09	Reg. No. 37,607

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature 

Typed or printed name Robert J. Depke

Date 7/6/09

This collection of information is required by 37 CFR 1.6. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.